

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: monospace;">10-661254</div>		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	3		2							
Total Depend	17		55							
Total Claims	20		57							

Filing Date

10-661254

Applicant(s)

* May be used for additional claims or amendments

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